

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450**

*JUN 17 2004*

**or Fax (703) 746-4000**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590                    05/28/2004

Milliken & Company  
P.O. Box 1926  
Spartanburg, SC 29304

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

<i>Charlotte C. Wilson</i>	(Depositor's name)
<i>Charlotte C. Wilson</i>	(Signature)
<i>June 14, 2004</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/876,702	06/07/2001	Ramesh Keshavaraj	2178A	1971

TITLE OF INVENTION: AIR BAG TETHER CONSTRUCTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/30/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
SINGH, ARTI R	1771		280-743200		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Terry T. Moyer

2 Charlotte C. Wilson

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Milliken & Company

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

920 Milliken Road, Spartanburg, SC USA

Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee  
 Publication Fee  
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A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-0500 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

*Charlotte C. Wilson*      *(Date)* *June 14, 2004*

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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**06/21/2004 HGUTEMAP 00000012 09876702**

**01 FC:1501  
02 FC:1504**

**1330.00 0P  
300.00 0P**

TRANSMIT THIS FORM WITH FEE(S)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Application of: Ramesh Keshavaraj

Serial Number: 09/876,702

Filed: June 7, 2001

Title: Air Bag Tether Construction

Group Art Unit: 1771

Examiner: Singh, Arti R.

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence, and all correspondence referenced herein as being enclosed with this correspondence, is being deposited with the United States Postal Service in an envelope addressed to "Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" with sufficient postage on the date listed below:

Check #: 345387 Amount: \$ 1,630.00

Date: June 14, 2001

Name: HEIDI M. LEWIS

Signature: Heidi M. Lewis

**RESPONSE TO NOTICE OF ALLOWANCE AND FEE(S) DUE**

In response to the Notice of Allowance and Fee(s) Due, dated May 28, 2004, attached is a copy of the Notice and a check in the amount of \$ 1,630.00. Please charge any deficiency thereof to Deposit Account 04-0500. A duplicate copy of this sheet is enclosed.

Respectfully requested,

June 14, 2004



Charlotte C. Wilson  
Agent for Applicants  
Reg. No. 45,224  
Telephone: (864) 503-2194